

Fill in block capitals *delete or write none where appropriate			
Name of Company		Constitution – Private / Public / Limited Liability Com.	
Registered Address		Date of Incorporation	
Tel. No.		Office Address	
TEL. No.		TEL. No.	
Name of directors	% of shares Held	Address	Tel. No.
(Please attach latest copy of company profile information sheet issued by Ministry of Economic Development)			
Names of other major shareholders		% of shares held	
Types of business & trading lines			
Facilities Requested			
Facility		Amount	
Purpose detailed			
Repayment plan and source			
Security /ies offered			

Names of subsidiaries Associate companies	% of shares held By the applicant Company	Nature of business / trading lines	

Advance made to / subsidiaries Associate companies	Amount	Present o/s	Repayment

Borrowings from subsidiaries / associate companies	Amount	Present o/s	Repayment

Bank accounts & finance company deposits (please give all current / deposit / Savings accounts with us & other financial institutions)

Name of institutions	Branch	Type of account	A/c no. (if any)	Balance

Existing facilities with commercial bank of maldives (if any) including facilities enjoyed by subsidiaries / associate companies

Branch	Date & type Of facility	Limit / original amt.	Present Outstanding	Securities held

Facilities with other banks / finance com. / hire purchase leasing com. / others

Name of Institution	Date & type Of facility	Limit / original amt.	Present Outstanding	Securities held

Tax position for the past 03 years (attach supporting documents)

Year of Assessment	Total / statut.Inc	Taxable income	Tax	Amount paid

Business Turn over Tax for the past 03 years (Attach supporting documents)

Year	1 st quarter	2 nd quarter	3 rd quarter	4 th quarter
201.....				
201.....				
201.....				

Financial Statements

Please enclose Audited Accounts for the Past 03 years. In case the Audited or Draft Accounts for the last year is not available, you may submit the following figures for the Last Tax year as at

- | | |
|-------------------------|--|
| Sales | Other Debtors |
| Gross Profit | Trade Creditors |
| Net Profit | Other Creditors |
| Turnover Tax Paid | Due to Other Banks |
| Stock in Trade | And/or Finance Companies |
| (Insured for MVR.)..... | Borrowings of Directors (Private) |
| Trade Debtors..... | Fixed Assets |

Details of any Previous Borrowings within the Last 04 years which have been settled in full

Any other information which in your view would be relevant to this Application

Name of directors and / or* others who manage the business

The information set above is true to the best of our knowledge & belief & we agree that the Bank may from time to time after receipt of this Application make inquiries about our affairs as it may think fit.

Date Account No.....
Signature of Directors

The person to be contacted for any further clarification

Name Tel No.....